



BARBARA K. CEGAVSKE
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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Office of the
Secretary of State

Barbara Cegavske

Barbara Cegavske
Elections Division

State of Nevada
**Committee for Political Action
(PAC)**
Registration Form
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JStokes

1/11/2016

#1877

ABOVE SPACE IS FOR OFFICE USE ONLY

- ☐ New Registration ☐ PAC (Advocating Passage or Defeat of a Ballot Question)
- ☒ Annual (Due on or before January 15th of each year; NRS 294A.230(4)(b))
- ☒ Amended Registration: ☐ Change Officers ☒ Change Registered Agent ☐ Change Address
check all that apply
- ☐ Change Name ☐ Other: Previous Name of PAC

Name of Committee:

TSVC, Inc. Political Action Committee (Terracon PAC)

Telephone:

248-371-7270

Mailing Address:

18001 West 106th Street, Suite 300

Olathe

KS 66061

Street Name, Number

City

State Zip Code

PAC Active Email Address: mkdeinpsey@comerica.com

PURPOSE: Briefly state the purpose for which the PAC was organized.

To collect and disburse contributions to state and local candidates who's views are similar to that of TSVC, Inc.

REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada.

Name of Registered Agent:

Daniel De Battista

Telephone:

702-979-7985

Physical Address:

750 Pilot Road Suite F

Las Vegas

NV 89119

Street Name, Number

City

State Zip Code

REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action.

X Daniel F. De Battista

Signature of Registered Agent

Date:

1/8/2016



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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title:

Donald Vrana Treasurer

Mailing Address:

18001 West 106th Street, Suite 300

Street Name, Number

Olathe
City

Telephone:

913-577-0394

KS 66061

State Zip Code

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization:

TSVC, Inc.

Mailing Address:

18001 West 106th Street, Suite 300

Street Name, Number

Olathe
City

Telephone:

913-599-6886

KS 66061

State Zip Code

Telephone:

Name of Organization:

Mailing Address:

Street Name, Number

City

State Zip Code

Name of Organization:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

SUBMITTED BY:

X

Signature of Representative of Group

Printed Name:

Daniel De Battista

Date:

1/8/2016

Telephone:

702-979-7985